

# CONNECTING WITH THE COMMUNITY:

## Engagement and Retention in Minority Diabetes Prevention Programs

---

MINORITY DIABETES PREVENTION PROGRAM WEBINAR

NORTH CAROLINA DEPARTMENT OF HEALTH AND HUMAN SERVICES

APRIL 20, 2017



# WHAT IS YOUR AFFILIATION WITH DIABETES PREVENTION PROGRAMS?

---

1. Lifestyle Coach
2. Regional Coordinator
3. Community Partner
4. Health Director
5. Other

# INTRODUCTION OF SPEAKERS

---



**Carmen D. Samuel-Hodge,  
PhD, MS, RD**



**Jill Rushing, MS**



**Kamaria Mason,  
MS, MPH, RD, LDN**

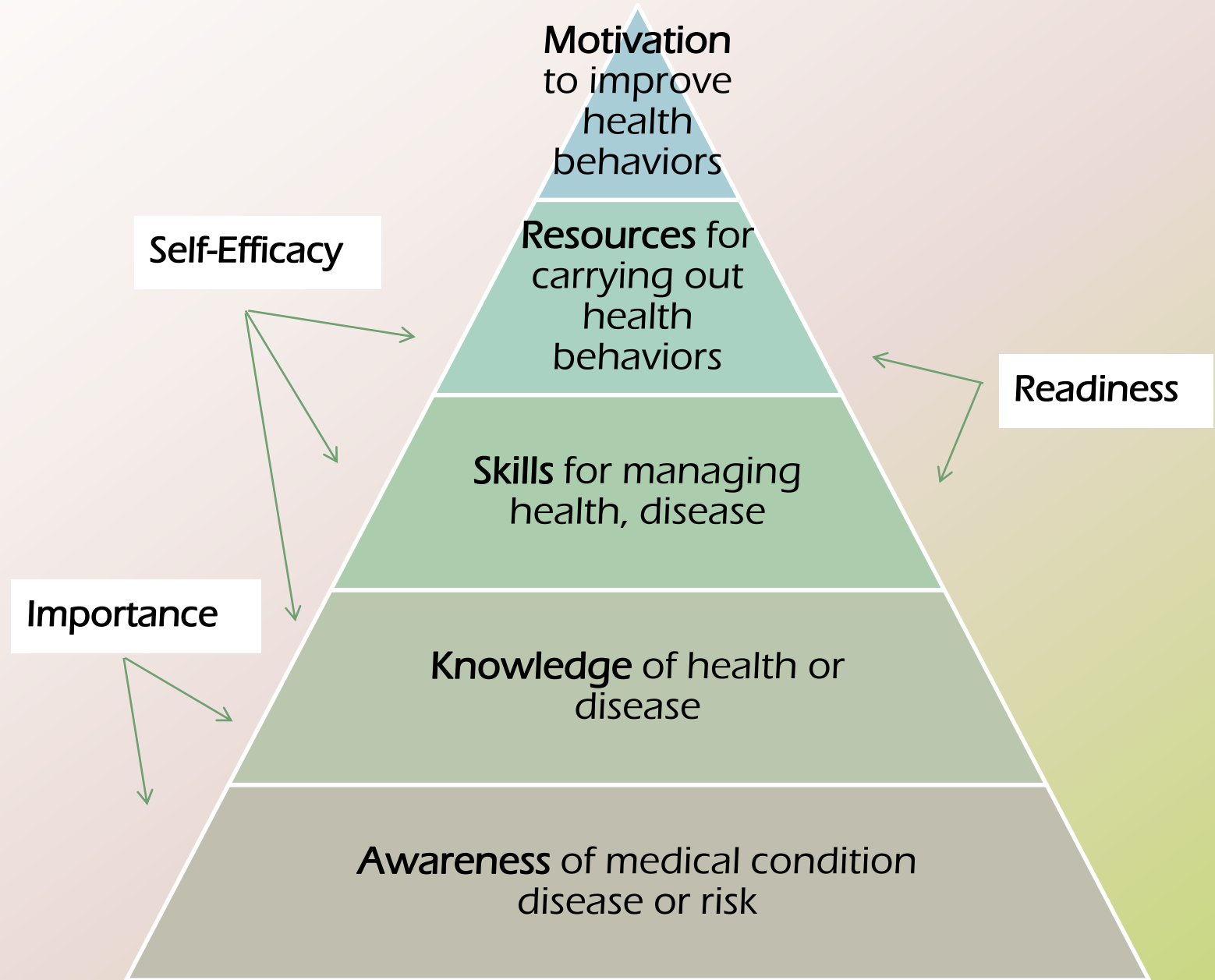


# Motivation in Weight Loss Interventions

**Think about...**

A health-related change you made and your motivation to make that change?

# Motivation to Make Health Behavior Changes



# Motivational Interviewing

## Layperson's definition:

- MI is a **collaborative** conversation style for strengthening a person's own **motivation** and commitment to change

## Practitioner's definition:

- MI is a **person-centered** counseling style for addressing the common problem of **ambivalence** about change.



# 4 Principles



Source: Rosengren , 2009

# R-U-L-E (Principles)

## Resist 'righting reflex'

- Actively trying to **fix** your clients' problems often leads to **resistance**
- Instead...
  - Allow the client to voice any **ambivalence** to change
  - Remember, it's not about you and your client brings a lot to the table

## Understand client's motivation

- Motivation comes from **within the client**.
- The counselor does NOT motivate clients or install motivation in them
- Understanding what motivates the clients helps the counselor facilitate behavior change



# R-U-L-E (Principles)

## Listen!

- Listening allows the counselor to 'look at the world from the client's point of view' (**empathy**)
- Listening with a **respectful attitude** facilitates change

## Empower

- Behavior change is enhanced when clients are actively engaged
- To empower is to...
  - Support your clients' belief that they are capable (build **self-efficacy**)
  - Reinforce that clients are '**experts** on themselves'
  - Communicate **hopefulness** that change is possible

# Important Factors Linked to Weight Loss Success



What Gets In The Way  
What Helps

# **Barriers to Changing Weight-Related Behavior (Adherence)**

- **Poor Motivation**
- Social and Environmental Pressures
- Lack of **Time**
- Negative Thoughts and Mood
- Gaps in knowledge or awareness
- Lack of enjoyment of exercise
- Unrealistic weight loss expectations

# What Helps to Promote Weight Loss?

- Strong Motivation (personal reasons)
- Ready, Willing, and Able to change
- Showing up
- Keeping Track (Self-awareness of key behaviors)
- Support



# Consider These Things...

- Screen for **motivation** BEFORE enrollment
  - Reasons | Readiness | Confidence | Support
  - Competing priorities (barriers to showing up)
- Introduce the program ( 1<sup>st</sup> session) with a **conversation about motivation**
  - “What made you decide to join this program?”
- **Revisit motivation** when participants get off track

# Consider These Things...

- Build confidence
  - Demonstration and practice
- Focus on early weight loss
- Share progress (success motivates)
  - Progress reports
- Use motivational quotes
- Use incentives to encourage new behaviors



**Comments? Questions?**

thank you!

## **WHICH STRATEGY DO YOU PLAN TO APPLY TO SUPPORT RETENTION AND MOTIVATE PARTICIPANTS TO REACH THEIR 5% WEIGHT LOSS GOAL?**

---

1. Use motivational quotes and text messages
2. Celebrate weekly successes, large or small
3. Bring healthy food items for participants to try
4. Do a recipe swap
5. Be their biggest cheerleader



# Evaluation Matters

Who, What, Why, When, & How of Evaluation

# Overview

- Who
- What
- Why
- When
- How
- Resources

# Who Are Evaluators?

- Jill Rushing
- DPP Program Coordinators and Lifestyle Coaches
- DPP Participants

# What Is i-ˌval-yə-ˈwā-shən?

## Evaluate:

To determine the significance, worth, or condition of usually by careful appraisal and study

-Merriam-Webster, 2017

## Program Evaluation:

a systematic way to **improve** and **account for** public health actions by involving procedures that are **useful, feasible, ethical, and accurate**

-CDC, 2016

# Why Is Evaluation Important?

a systematic way to **improve and account for** public health actions by involving procedures that are useful, feasible, ethical, and accurate

-CDC, 2016

You want to:

- create the best program possible
- get/keep CDC recognition
- demonstrate value of DPP

**Evaluation allows you to do this!**



# When Do You Conduct Evaluation?

- Conduct formative (or process evaluations) **during implementation** in order to **improve programs**
- Conduct summative (or outcome evaluations) at the **end of implementation** in order to **make judgments about the program**

Source: Michael Quinn Patton, 2008

# How Do You Conduct Evaluation?

## The CDC Model



# How Do You Conduct Evaluation?

## The CDC Model (in reality)



# Evaluation with a Health Equity Lens

*Unless there is a deliberate intention to address health inequalities and to build up evaluations that purposefully use equity as a value criterion, the field of health promotion may go astray regarding its underlying commitments to equity in health.*

-- Louise Potvin

# How Do You Conduct Evaluation with a Health Equity Lens?

- Develop a Logic Model That Includes Health Equity Activities and Goals
- Incorporate Health Equity into Evaluation Questions and Design
- Identify Appropriate Variables to Track Populations Experiencing Inequities
- Use Culturally Appropriate Tools and Methodologies
- Use Multiple Approaches to Understand an Intervention's Effect on Health Inequities
- Include Health Equity Indicators Into Performance Monitoring Systems
- Use Process and Outcome Evaluations to Understand the Effect on Health Inequities
- Widely Disseminate the Results of Equity-Oriented Evaluations

-- CDC Health Equity Guide, 2013

# Resources and Up Next

## Resources

- Rossi, Lipsey & Freeman (2004) *Evaluation: A Systematic Approach*
- Michael Quinn Patton (2008) *Utilization-Focused Evaluation*
- American Evaluators Association (AEA) – <http://www.eval.org/>
- AEA's Statement on Cultural Competence in Evaluation - <http://www.eval.org/ccstatement>
- CDC's Addressing Health Equity in Evaluation Efforts - <https://www.cdc.gov/nccdphp/dch/pdfs/health-equity-guide/health-equity-guide-sect-1-7.pdf>

## Up Next

- Community-Based Participatory Evaluation – Kamaria Mason

# Thank You!

Jill Rushing  
[jill.rushing@dhhs.nc.gov](mailto:jill.rushing@dhhs.nc.gov)



# WHICH STRATEGY WOULD YOU LIKE TO IMPLEMENT WHEN EVALUATING DIABETES PREVENTION PROGRAMS THROUGH A HEALTH EQUITY LENS?

---

1. Make a logic model with health equity activities and goals
2. Add health equity into evaluation questions and design
3. Find variables to track populations facing inequities
4. Use culturally appropriate tools and methodologies
5. Add health equity indicators into performance monitoring



# COMMUNITY CONVERSATIONS

---

Improving Diabetes Prevention Programs through  
Community-Based Participatory Evaluation

# Benefits of Empowerment and Participatory Evaluation

---

- **Empowerment Evaluation**
  - Commitment to social justice and fair allocation of resources
- **Participatory Evaluation**
  - Identifying lessons learned to help improve implementation

# What IS Community-Based Participatory Evaluation (CBPE)?

---

- **Underlying value**
  - Self-determination
- **Endpoint**
  - Improvement versus judgement of program's merit or worth

# What is NOT Community-Based Participatory Evaluation (CBPE)?

---

- Data-driven decision-making process
- Assessment of return on investment



# Why CBPE is important to diabetes prevention?

---

- **Health inequities and disparities**
- Participant retention
- Weight loss
- Community engagement



Social Ecological Model

# Why CBPE is important to diabetes prevention?

---

- Health inequities and disparities
- **Participant retention**
- Weight loss
- Community engagement



# Why CBPE is important to diabetes prevention?

---

- Health inequities and disparities
- Participant retention
- **Weight loss**
- Community engagement



Social Ecological Model

# Why CBPE is important to diabetes prevention?

---

- Health inequities and disparities
- Participant retention
- Weight loss
- **Community engagement**

# How can we start to incorporate CBPE in diabetes prevention?

---



## **Community Conversations**

*Public forums that invoke a community dialogue that builds awareness and support around health issues within the community.*

# Resources

---

- Agency for Healthcare Research Quality- <https://www.ahrq.gov/professionals/prevention-chronic-care/resources/clinical-community-relationships-measures-atlas/ccrm-atlas3.html>
- Centers for Disease Control and Prevention Diabetes Prevention Recognition Program–  
<https://www.cdc.gov/diabetes/prevention/pdf/dprp-standards.pdf>
- Centers for Disease Control and Prevention: Addressing Health Equity in Evaluation Efforts-  
<https://www.cdc.gov/nccdphp/dch/pdfs/health-equity-guide/health-equity-guide-sect-1-7.pdf>
- Leandris C. Liburd (2010) Diabetes and Health Disparities: Community-Based Approaches for Racial and Ethnic Populations
- Ronald L. Braithwaite, et al. (2012) Community-Based Participatory Evaluation: The Healthy Start Approach
- National Institute of Health (2011) Principles of Community Engagement (second edition): Program Evaluation and Evaluating Community Engagement

# Thank You!

---

**Kamaria Mason**

Kamaria.Mason@dhhs.nc.gov

# QUESTIONS

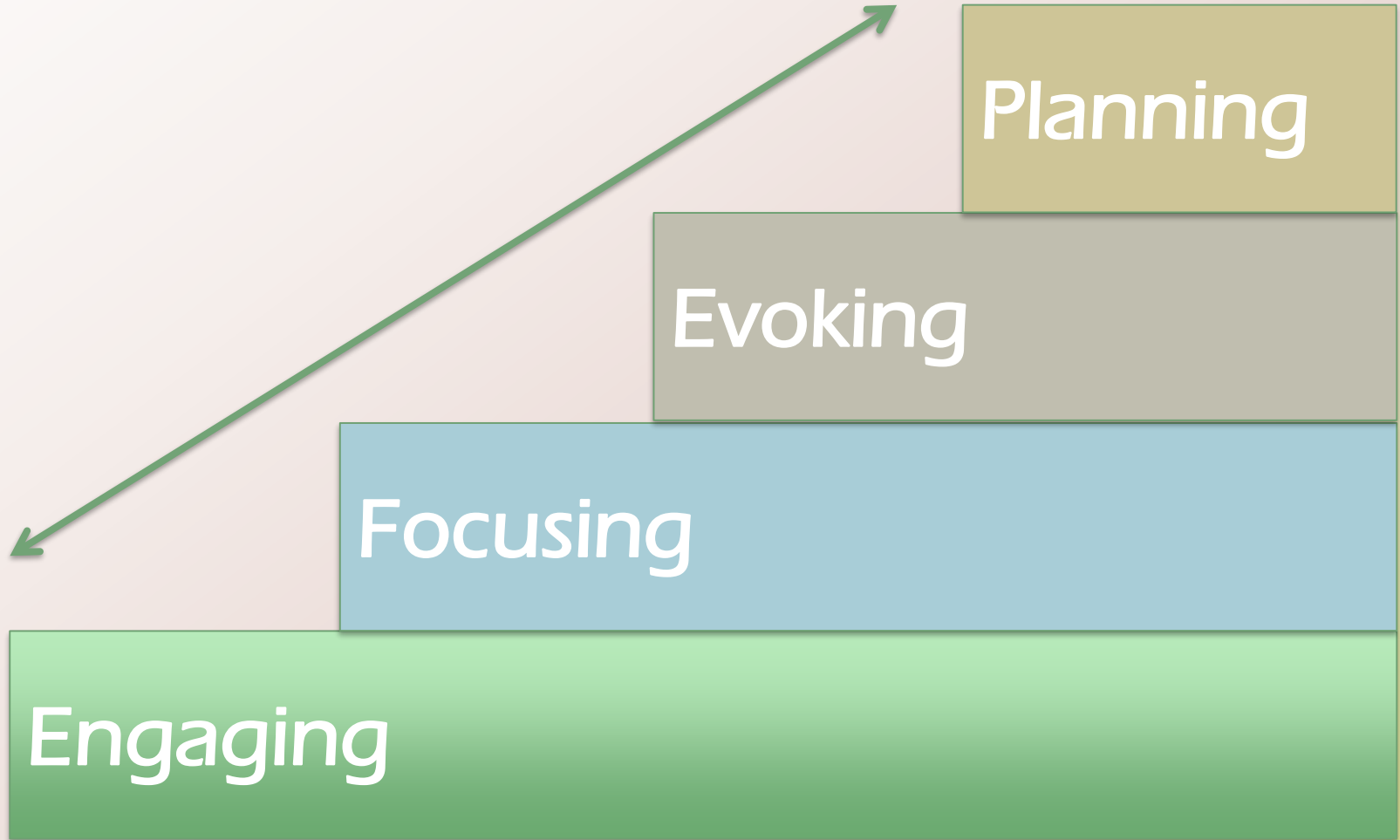
---

Please type the name of the presenter you are referring your question to along with your question in the chat box now.

Motivational Interviewing Processes

**EXTRA SLIDES – INFORMATIONAL**

# 4 Processes





# Engaging

- Building a **relationship** and **connecting** with the client
- Starting point for **collaboration**
- More than being friendly or nice

# Focusing

- Setting the **agenda**
  - Finding out what the person wants to talk about in the *conversation about change*
- Identifying '**change goals**'
  - Changing behaviors and/or attitudes (choosing)
  - Choosing whether to change or not

# Evoking

- Getting the client to voice his/her own motivations for change
  - Voicing the arguments for change
- Hearing the client's own ideas and feeling about the 'why' and 'how to' change
- Guiding the client to *actively participate* in the change process

# Planning

If client is 'ready' → start planning...

- Planning for when and how to change
- Client is seeking information and advice about how to move forward with change
- Developing commitment
- Developing action plan